



**CANDIDATE'S STATEMENT OF ORGANIZATION AND
DESIGNATION OF PRINCIPAL COMMITTEE OR EXPLORATORY COMMITTEE**

(CFA-1)

State Form 4604 (R12/9-09)
Indiana Election Commission (IC 3-9-1-3; IC 3-9-1-4; IC 3-9-1-5)

PLEASE TYPE OR PRINT LEGIBLY IN BLACK INK. SEE INSTRUCTIONS ON REVERSE SIDE.

FILE NUMBER

1. IS THIS AN AMENDMENT? ☐ No ☒ Yes If Yes, please enter the file number in this box →

SECTION A. CANDIDATE INFORMATION: Fill in all applicable boxes as fully and accurately as possible.

2. Last Name DOVE	First Name TERRY	Middle Name M	Nickname	3. Type of Committee (Check one) <input checked="" type="checkbox"/> Candidate's Principal Committee <input type="checkbox"/> Exploratory Committee
4. Mailing Address P.O. Box 3028		5. FAX (Optional)		6. E-mail Address (Optional)
7. City Indianapolis	State IN	ZIP Code 46206	8. County Marion	9. Telephone (Day) (317) 701-4191
11. Party Affiliation <input type="checkbox"/> Democratic <input type="checkbox"/> Libertarian <input checked="" type="checkbox"/> Republican <input type="checkbox"/> Other			12. Office Sought (Include district number, if any. Not required for an exploratory committee.) Marion County Recorder	

SECTION B. COMMITTEE INFORMATION: Fill in all applicable boxes as fully and accurately as possible.

13. Full Name of Committee (Do not abbreviate) <input type="checkbox"/> Check if this is a new name COMMITTEE TO ELECT TERRY DOVE				
14. Mailing Address <input type="checkbox"/> Check if this is a new address P.O. Box 3028		15. FAX (Optional)		16. E-mail Address (Optional)
17. City Indianapolis	State IN	ZIP Code 46206	18. County MARION	19. Telephone (317) 701-4191
20. Committee Organization Date (MM-DD-YY) 11-30-2013				
21. Chairperson's Full Name <input checked="" type="checkbox"/> Designate Candidate as Chairperson <input type="checkbox"/> Check if this is a new chairperson				
22. Mailing Address <input type="checkbox"/> Check if this is a new address		23. FAX (Optional)		24. E-mail Address (Optional)
25. City	State	ZIP Code	26. County	27. Telephone (Day)
29. Bank or Other Depositories (List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.) BMO HARRIS				
30. Exploratory Committee (Give brief statement explaining purpose of an exploratory committee only.)		31. Salaries and Reimbursements (Will the committee pay the candidate a salary or reimbursement for lost wages? If Yes, attach a copy of the contract.) <input type="checkbox"/> No <input type="checkbox"/> Yes		

SECTION C. APPOINTMENT OF TREASURER (IC 3-9-1-14)

32. I, as Chairperson of the foregoing committee, appoint the following person as Treasurer of the Committee.		Person Appointed Treasurer DELMON PITTMAN	Signature of the Committee Chairperson <i>Terry M. Dove</i>
33. Treasurer's Full Name <input type="checkbox"/> Designate candidate as treasurer <input type="checkbox"/> Check if this is a new treasurer DELMON R. PITTMAN, SR.			
34. Mailing Address <input type="checkbox"/> Check if this is a new address P.O. Box 3028		35. FAX (Optional)	
36. E-mail Address (Optional)		37. City Indianapolis	
State IN	ZIP Code 46206	38. County MARION	39. Telephone (Day) (317) 703-8216
40. Telephone (Evening) (317) 701-4191			

SECTION D. ACCEPTANCE OF APPOINTMENT (IC 3-9-1-15)

41. I give notice that I accept the duties and responsibilities of Treasurer of this Committee. I am not the chairperson of a campaign finance committee (except as permitted for a candidate committee under IC 3-9-1-7).

Signature of Person Accepting Appointment

SECTION E. CERTIFICATION OF STATEMENT

We certify as the candidate and the duly appointed Chairperson of the Committee and that we have examined this statement. To the best of our knowledge and belief it is true, correct and complete.

42. Typed or Printed Name of Chairperson TERRY M. DOVE	Signature of Chairperson <i>Terry M. Dove</i>	Date (MM-DD-YY) 12/9/2013
43. Typed or Printed Name of Candidate TERRY M. DOVE	Signature of Candidate <i>Terry M. Dove</i>	Date (MM-DD-YY) 12/9/2013

Warning: State law requires that any change in this information be reported within 10 days of the change (IC 3-9-1-10). A person who knowingly files a fraudulent report commits a Class D felony (IC 3-14-1-13). A person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B misdemeanor (IC 3-14-1-14), and may be subject to civil penalties (IC 3-9-4-16, IC 3-9-4-17, and IC 3-9-4-18).

FOR OFFICE USE ONLY

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DEC 09 2013

Chadwick A. White